

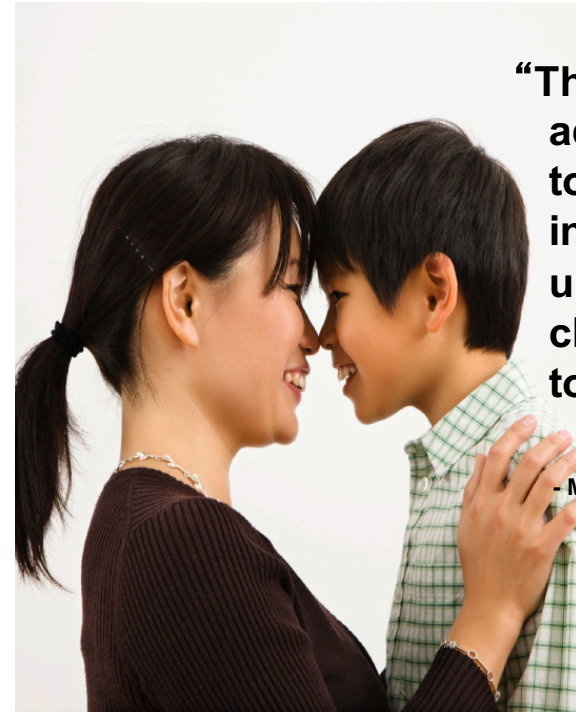


# Strong Communities Raise Strong Kids

Adverse Childhood Experiences:  
The Impetus for Change

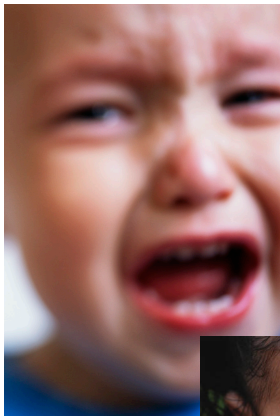


Regional Child Abuse Prevention Councils 2011



**“The solution of all adult problems tomorrow depends in large measure upon the way our children grow up today.”**

**- Margaret Mead, Anthropologist**



## What Are ACEs?

Adverse Childhood Experiences

- ACEs are experiences in childhood that are unhappy, unpleasant, hurtful.
- Sometimes referred to as toxic stress or childhood trauma.



## ACEs Often Last a Lifetime . . . But They Don't Have To

- Healing can occur
- The cycle can be broken
- Safe, stable, nurturing relationships heal parent and child.



## Complete ACE Questionnaire

- What does it make you think about?
- Keep in mind your thoughts as we present the ACE Study



## What are Adverse Childhood Experiences (ACEs)?

- **Growing up (prior to age 18) in a household with:**
  - Recurrent physical abuse.
  - Recurrent emotional abuse.
  - Sexual abuse.
  - Emotional or physical neglect.



## Growing up (prior to age 18) in a household with (cont):

- An alcohol or drug abuser
- An incarcerated household member.
- Someone who is chronically depressed, suicidal, institutionalized or mentally ill.
- Mother being treated violently.
- One or no parents.



## Why is This Important?

Because ACEs are:

- Surprisingly common
- Occur in clusters
- The basis for many common public health problems
- Strong predictors of later social functioning, well-being, health risks, disease, and death



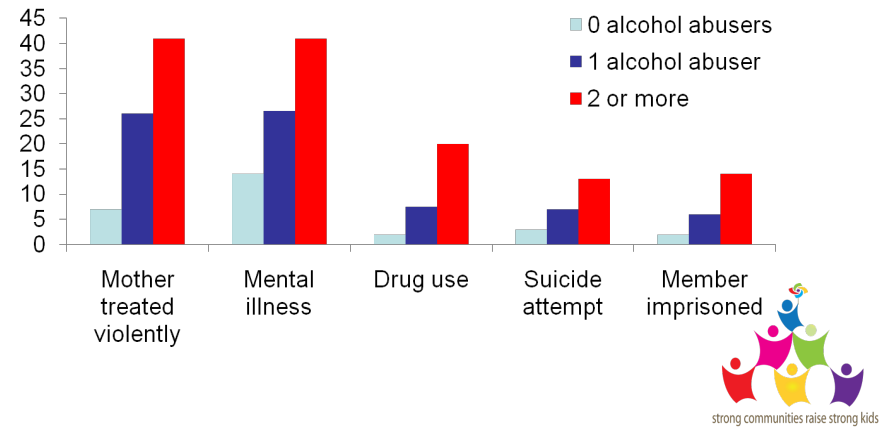
## ACE Scores

- 1/3 of adults have an ACE score of 0
- The majority of adults with an ACE score of 0 have few, if any, risk factors for diseases that are common causes of death in the US.



## ACE's are Highly Interrelated

Alcohol Abuse in the Home and the Risk of Other Household Exposures During Childhood



- An ACE Score of 4 or more results in having multiple risk factors for these diseases or the disease themselves.
- An ACE score of 6 or more results in a 20 year decrease in life expectancy.



## Top 10 risk factors for death in the USA

- ✓ smoking,
- ✓ severe obesity,
- ✓ physical inactivity,
- ✓ depression,
- ✓ suicide attempt,
- ✓ alcoholism,
- ✓ illicit drug use,
- ✓ injected drug use,
- ✓ 50+ sexual partners,
- ✓ history of Sexually Transmitted Disease



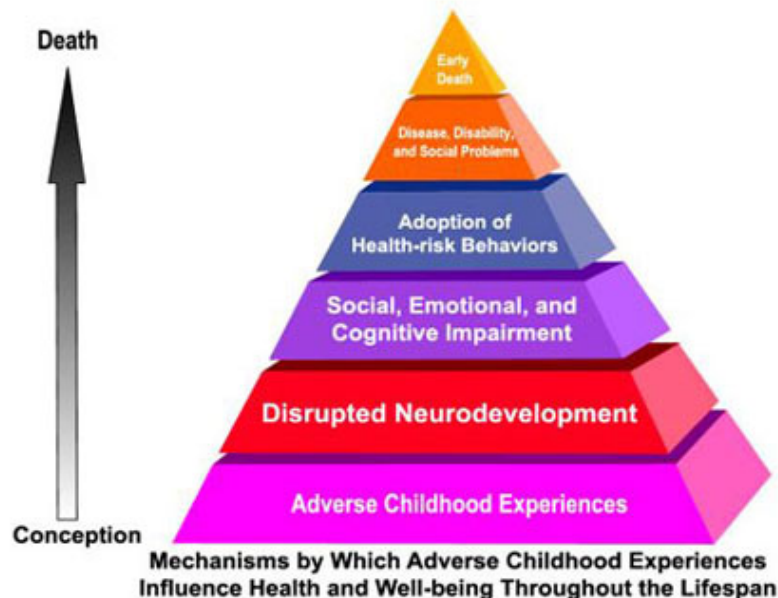
## Evidence Suggests:

- Many chronic diseases in adults are determined decades earlier, by experiences in childhood
- Risk factors/behaviors for these diseases are initiated during childhood or adolescence and continue into adult life.



## Seeking to Cope

- The risk factors/behaviors underlying these adult diseases are actually effective coping devices.
- What is viewed as a problem is actually a **solution** to bad experiences.
- Dismissing these coping devices as “bad habits” or “self destructive behavior” misses their functionality.



## Behavior is Predictable

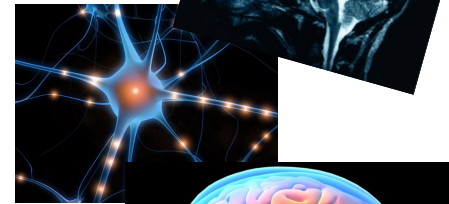
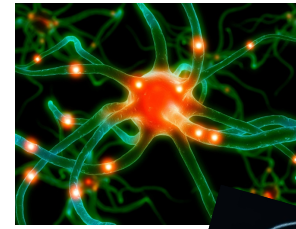
All behavior has meaning - both good behavior and bad behavior

We need to look closely at what preceded the behavior - What happened first that is causing this behavior?



## Life in a Tough World

If trauma/toxic stress occurs early in life, the brain becomes wired to survive it.



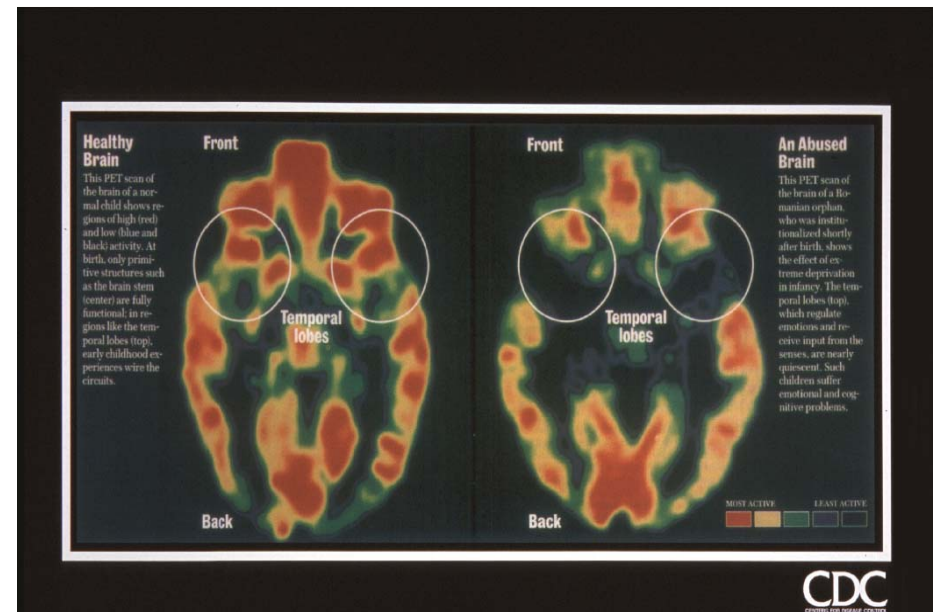
## Early Brain Development

- Nurturing, responsive, and individualized interactions from birth build healthy brain structure.
- Healthy brain architecture is the necessary foundation required for optimal future learning, behavior and health.



## Stress and the Brain

- Excessive and repeated stress:
  - Neglect, violence
  - Chaos, unpredictability
  - Hostility, rejection
- Causes disruption of brain architecture:
  - Impairs cell growth
  - Interferes with healthy neural circuits



## What Does This Look Like?

Teen that is:

- Edgy, hot tempered
- Impulsive
- Hyper-vigilant



## By adolescence, children seek relief through:

- Drinking alcohol
- Smoking tobacco
- Sexual promiscuity
- Using drugs
- Overeating/eating disorders
- Delinquent behavior

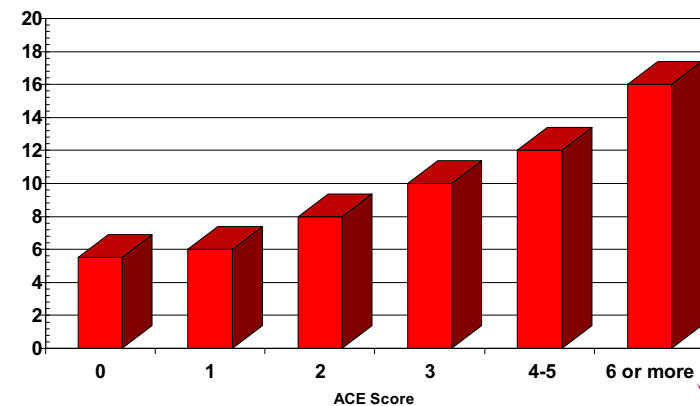


## High Risk Teen Behaviors

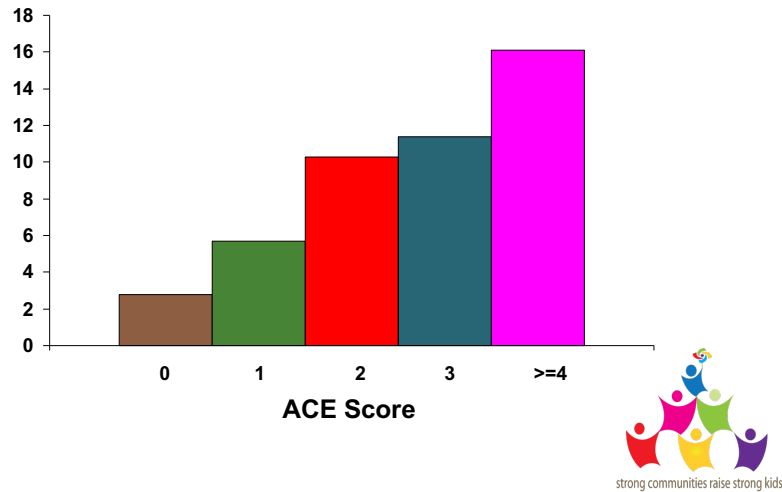
- May not be the core problem
- They may be the coping devices
- A way to feel safe or just feel better



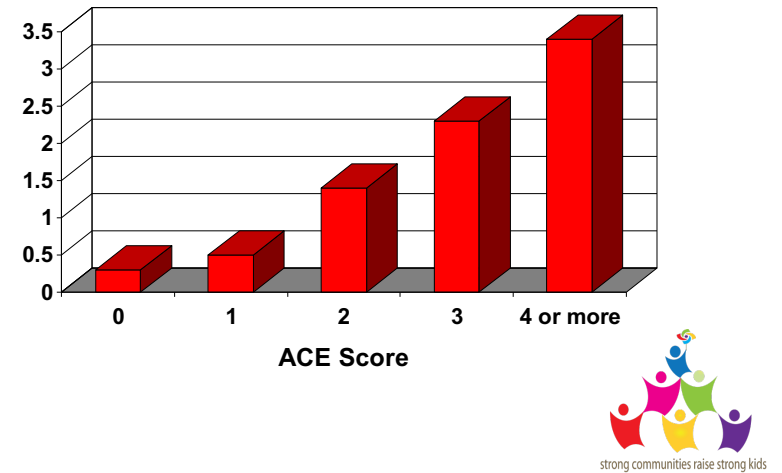
## Adverse Childhood Experiences vs. Smoking as an Adult



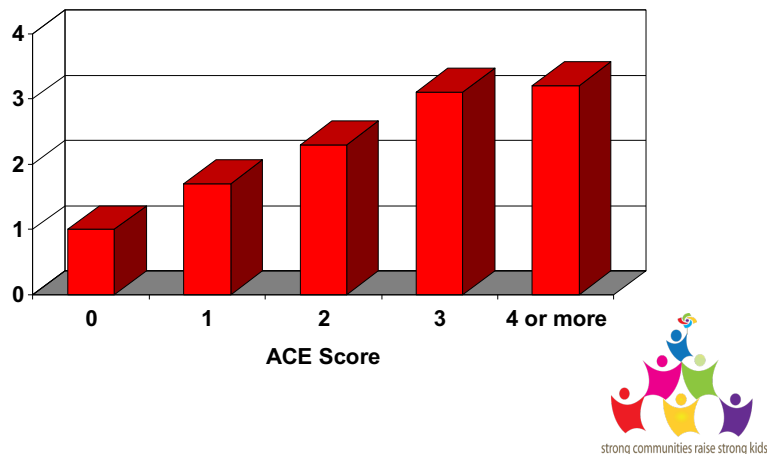
## Adverse Childhood Experiences vs. Adult Alcoholism



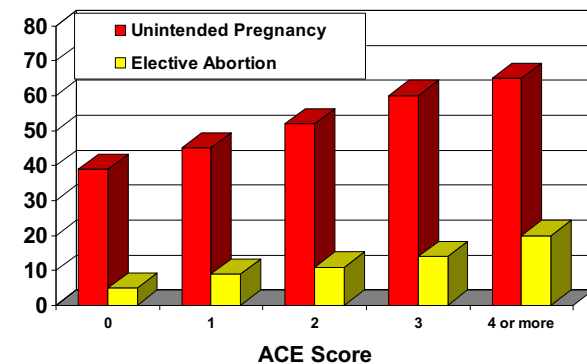
## ACE Score vs. Intravenous Drug Use



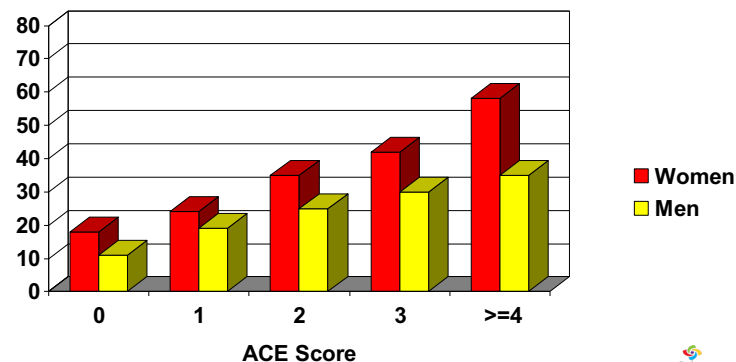
## Adverse Childhood Experiences vs. Likelihood of > 50 Sexual Partners



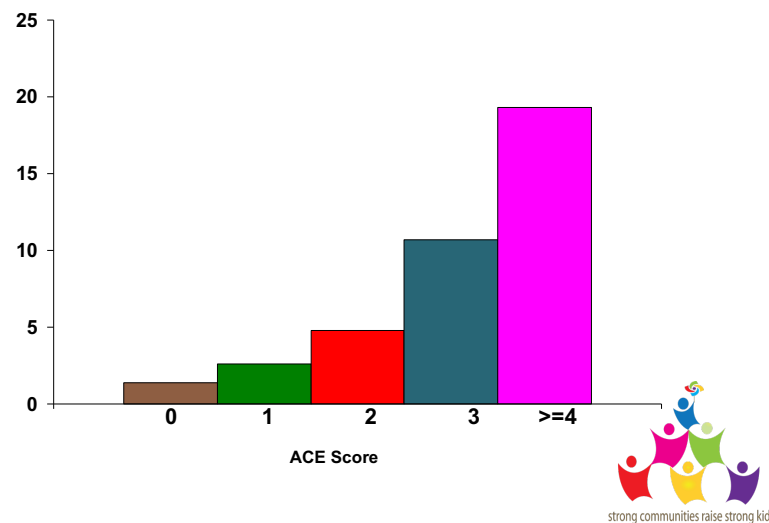
## ACE Score vs. Unintended Pregnancy or Elective Abortion



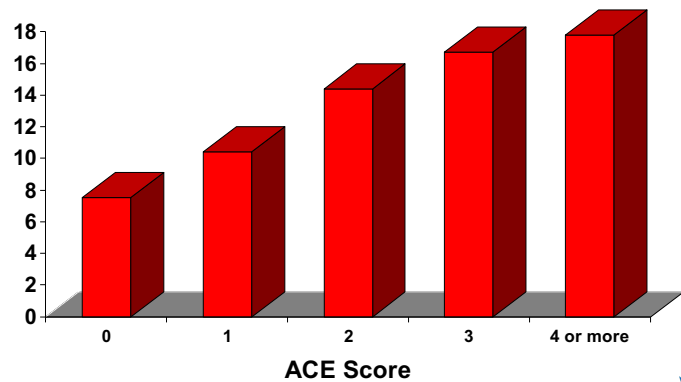
## Childhood Experiences Underlie Chronic Depression



## Childhood Experiences Underlie Later Suicide



## ACE Score vs. Serious Job Problems



## Health Care Costs

US Health Care Spending was \$7,600 per person for total of \$2.3 Trillion (2007)

75% nations health spending was for chronic diseases (heart disease, cancer, stroke, and diabetes)

2.8 million cases of 7 most common chronic diseases reported in Arizona costing 4.2 billion (2003)





## Reducing Costs

Research shows that just asking about ACEs – significantly decreases doctor office visits and costs.



## Pay Now or Pay Later

- Pay now for programs that have been proven to buffer the stress, or pay later in rising health costs.
- “Early childhood investments of high quality have a lasting effect.”



“\$10 return on investment for every \$1 spent.”

(James Heckman, Noble Laureate, Economics)



## Our Challenge

- We **can** and **must** “immunize” kids against the effects of ACEs.
- We **can** and **must** reduce the numbers of ACEs for all children!



**How Do  
We Meet  
the  
Challenge?**



## It Starts With US!

- Identify and understand the importance of protective factors
- Utilizing protective factors in your own life
- Empower others by educating and encouraging them to use protective factors



## Caring Communities Can Help Reduce ACEs



## Protective Factors

- Are conditions that increase health and well being
- Are critical for **everyone** regardless of age, sex, ethnicity or racial heritage, economic status, special needs, or the dynamics of the family unit
- Are buffers that provide support and coping strategies



## Protective Factors that Strengthen Families and Communities

- Nurturing and Positive Relationships
- Knowledge of Parenting and Child Development
- Parental Resilience
- Social Connections
- Concrete Support in Time of Need



# #1 = Nurturing and Positive Relationships.....

are the key to mentally healthy children and adolescents



## Safe, Stable, Nurturing Relationships

**SAFE** = free from harm

**STABLE** = a high degree of consistency



**NURTURING** =  
compassionate,  
responsive  
caregiver(s)



## What does it look like?

Someone you turn to:

- Who?
- How you feel?
- What she or he does?



## Building Supportive Relationships

It Starts with Modeling

- Asking questions and wondering
- Becoming an active listener
- Pointing out the positive
- Being empathetic



# Empathy

- Is not sympathy
- Empathy is connecting with your own life
- “The power of empathy” video



## Building Nurturing and Attachment

- Observe, attend and listen to children
- Provide safe and stable home and school life
- Model caring behavior
- Respond to child's needs
- Use positive discipline
- Notice and reinforce child's strengths



- Set up activities that promote bonding and attachment
- Acknowledge nurturing behavior

- Provide information on related topics:

- early secure attachments
- responding to cries
- shaken baby damage
- how father's nurture, etc.

- Be a caring adult or mentor a child



## #2 - Knowledge of Parenting and Child Development

### *Why Important?*

Parenting is not static

If you don't understand behavior you tend to interrupt it as negative

Normal challenges can lead to frustrations and harsh discipline



## Increasing Knowledge .....

Begin where parents are at:

- discuss hopes and dreams for their children
- identify strengths and build on them
- set up a time or place where parents can discuss and get information
- provide educational materials, websites



- Educate parents on what to expect next
- Model and teach positive ways to manage challenging behaviors: routines, limits, redirection, logic consequences
- Attend or set up parenting classes
- Learn about or educate others on the signs and symptoms of child abuse
- Provide education on ACE's

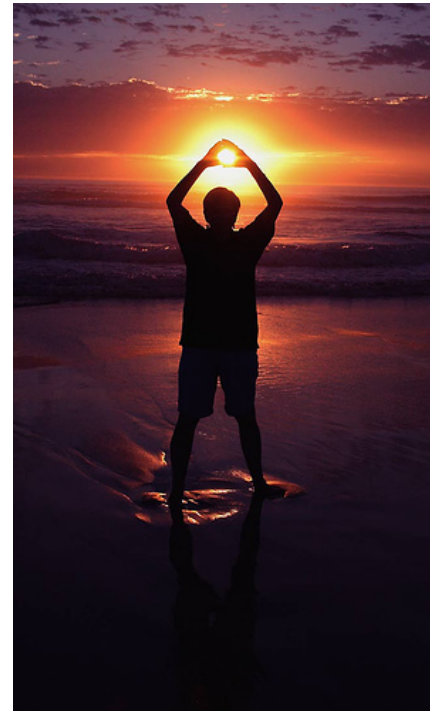


## #3 – Parental Resilience

*Good outcomes in spite of serious threats, toxic stress*

Resilient people:

- are prepared to be effective in the world
- can adapt to challenges
- are mentally healthy



## Resilience is ...

- Feeling connected to caring family and community
- Self-regulation skills
- Positive view of self
- Motivation to be effective in your environment



## Begin with yourself



- Take care of own mental health
- Develop healthy coping devices (regular exercise, reading, listening to music, nature, etc.)
- Seek out healthy family/friends for support
- Use community supports (counseling, substance abuse treatment, self-help programs, etc.)



## Building Resilience

- Recognize early signs of stress and connect people to resources
- Develop a trusting relationship and provide support
- Be a good neighbor
- Look for and point out inner strengths



## Teach the Seven C's

**You didn't CAUSE it**

**You can't CURE it**

**You can't CONTROL it**

**You can help take CARE of yourself**

**By COMMUNICATING your feelings,**

**Making health CHOICES, and**

**CELEBRATING being yourself**



- Teach skills to youth
- Plan activities that focuses on nutrition, exercising or relaxation techniques
- Help children develop healthy relationships



- Volunteer – reach out and help others
- Be a mentor
- Start a Community Circle of Care
- Model/teach problem solving skills, planning ahead, goals



## #4 - Social Connections

*Network of emotionally supportive friends, family and neighbors*

Important because:

- Ease burden of parenting
- Decrease isolation
- Children have a broader access to supportive adults and positive role model
- Provide opportunities to help



## Building Social Connections

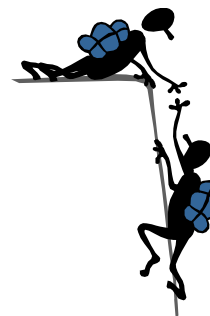
- Identify what parents already have in place and build upon it
- Provide opportunities for parents to get together – use parents skills, abilities and interest
- Look for opportunities – faith based, schools, community centers, support groups
- Provide encouragement and support to try new groups
- Teach social skills



## #5 Concrete Supports in Time of Need



- Food, shelter, basic services critical to child well-being
- Link caregivers to community resources and extended family
- Work on sustainability





## 7 Strategies to Build Strong Communities



## 1. Provide Information



- Educational workshops
- Radio announcements
- Community meetings
- Web-based
- Written material
- Conversations



## 2. Enhance Skills

Workshops or activities that are designed to increase the skills of participant

- Training
- Classes
- Consultation
- Counseling
- Team sport, scouting, 4H



## 3. Provide Support



- Be a good neighbor
- Offering mentoring or support groups
- Offering to help
- Spend quality and quantity time with a child; read a book, share a meal



## 4. Enhance Access and Reduce Barriers



- Seek grants, build local collaborations
- Offer food, shelter, seek professional help if needed
- Link clients to effective faith based activities, recreation, parenting classes, domestic violence shelters/education



## 5. Change Consequences

- Thank someone for their hard work
- Publicly recognize a community group that strengthens families
- Publish an article in a newspaper highlighting someone in the community
- Give rewards to individuals or businesses for helping in the community



## 6. Change the Physical Design

- Lead or participate in a clean up effort
- Initiate a change making your community safer
- Set up a place where parents can gather and get information
- Volunteer to paint a home
- Support your Child Abuse Prevention Council



## 7. Modify/Change Policy

- Talk to legislators and philanthropists about supporting effective programs
- Contribute to child abuse prevention programs via a tax check off
- Support positive parenting programs, and services for domestic violence and mental health education





If our **society is to prosper in the future**, we will need to make sure that **all** children have the opportunity to develop intellectually, socially and emotionally.



## Core elements of positive developmental, educational and therapeutic experiences

Relational (safe)  
 Relevant (developmentally matched)  
 Repetitive (patterned)  
 Rewarding (pleasurable)  
 Rhythmic (resonant with neural patterns)  
 Respectful (child, family, culture)

Dr. Bruce Perry,  
[www.childtrauma.org](http://www.childtrauma.org); [www.childtraumaacademy.com](http://www.childtraumaacademy.com)

## Neuroarcheology

- The age at which an adverse event takes place will influence the neurodevelopmental impact and the resulting functional consequences
- A developmental history of adverse experiences is crucial to understanding current functioning
- A developmental review of adverse experiences AND the buffering effects of relational health is critical

## Multiple Forms of Neglect

DOMAINS	THREE PATTERNS
Emotional	Episodic
Social	Chaotic
Cognitive	Total Global
Motor	

## Current Relational Health

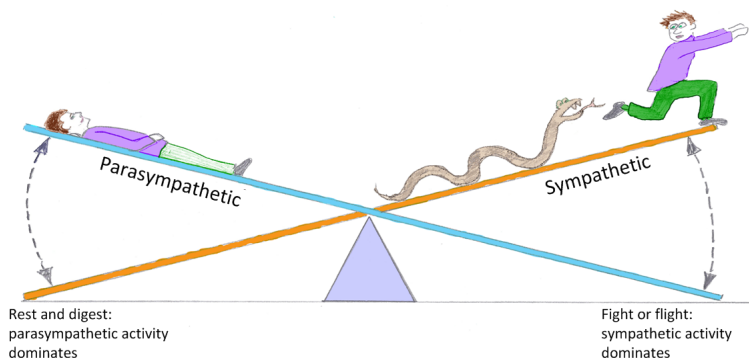
- A major factor in healings appears to be the nature, quality, intensity and stability of a person's relationships
- Good relational stability predicts positive outcome—and poor relational health predicts poor outcomes

## Adverse Childhood Experiences Survey

Let's Review the Implications

## Stress – Wigs Kids Out (and us too)

- **Homeostatic balance** (a state of **homeostasis**): having an ideal body temperature, an ideal level of glucose in the bloodstream, an ideal everything
- **Stressor**: anything that knocks you out of homeostatic balance



## Allostatic Load When Stress Becomes Too Much

• **Allostatic load**: the wear and tear on the mind and body that results from either too much stress or inability to manage stress.

- Not turning off the stress response when it is no longer needed
- Response to perceived stressors that never even happen
- Inability to manage the intensity of stressors in the moment

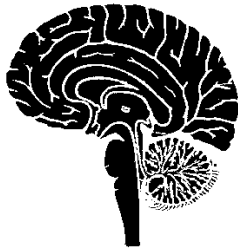


## Negative Impact of High Allostatic Load



### On our body:

- Headache
- Muscle tension or pain
- Cardiovascular
- Fatigue
- Change in sex drive
- Stomach upset
- Sleep problems



### On our mind:

- Anxiety
- Restlessness
- Lack of motivation
- Memory problems
- Irritability & anger
- Sadness or depression



### On our behavior:

- Angry outbursts
- Avoidance of important activities
- Overeating or undereating
- Social withdrawal
- Drug or alcohol abuse

## Adverse Childhood Experiences (ACES) Study

Of 17,000 respondents, two-thirds had at least one adverse childhood event

- Physical, emotional or sexual abuse
- Emotional or physical neglect
- Growing up with family members with mental illness, alcoholism or drug problems
- Family violence
- Incarcerated family member
- One or no parents
- Parental divorce

## Findings

### Of the 17,000+ respondents...

- Two-thirds had at-least 1 adverse childhood event
- 1 in 6 people had four or more ACES
- More than 25% grew up in a household with an alcoholic or drug user
- 25% had been beaten as children

## Findings Continued

- People with ACE scores of 4 or more:
  - Twice as likely to smoke
  - Seven times as likely to be alcoholics
  - Six times as likely to have had sex before age 15
  - Twice as likely to have cancer or heart disease
  - Twelve times more likely to have attempted suicide
  - Men with six or more ACEs were **46** times more likely to have injected drugs than men with no history of adverse childhood experiences

# ACES Findings

51% of children with 4+ ACE scores  
had learning and behavior problems in  
school

Compared with only 3% of children with  
**NO ACE score**

**Source:** Burke, N.J., Hellman, J.L., Scott, B.G., Weems, C.F & Carrion, V.C. (June 2011). "The Impact of Adverse Childhood Experiences on an Urban Pediatric Population," Child Abuse and Neglect, 35, No. 6.

# Educators Must Help!

Outer Cortex - Prefrontal  
Cortex

## Reason:

The child is in a place to  
learn, problem-solve,  
and reason

Limbic system

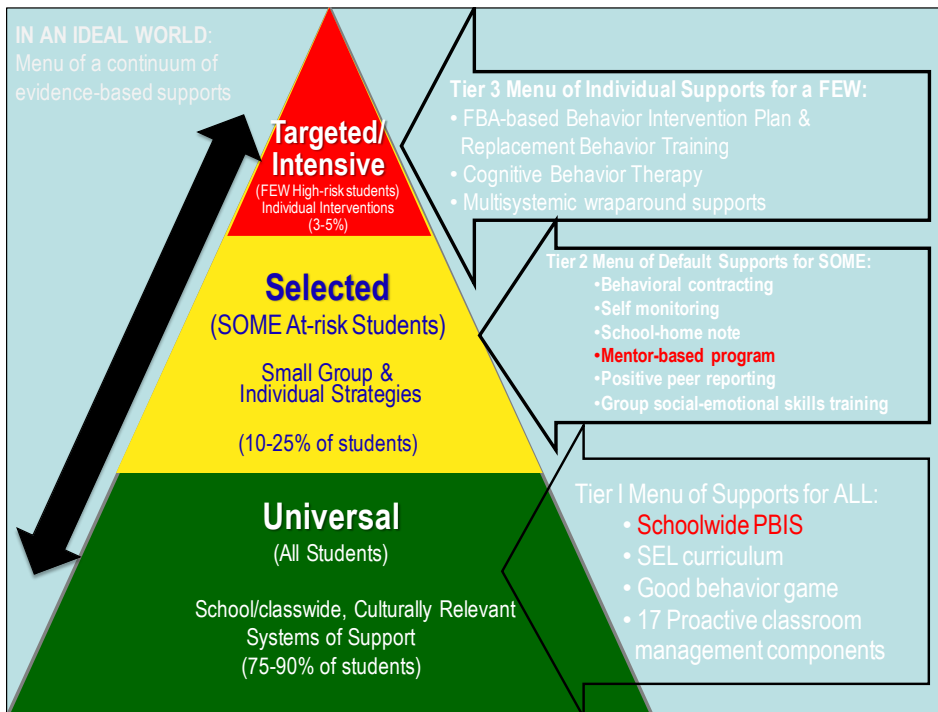
## Relate:

Connect with Empathy because  
until a child is able to relate they  
cannot problem-solve and reason

Brainstem

## Regulate:

Until a child is able to regulate via physically  
and emotionally cannot relate well



# Parenting Resources

- 1-877-705-KIDS (5437)  
Birth to Five Parenting Questions Helpline
- 1-800-4-A-CHILD (422-4453)  
Crisis Line for emotional needs and information about child abuse and neglect. Also go to [www.childhelp.org](http://www.childhelp.org)
- [www.apa.org/books](http://www.apa.org/books)
- [www.pbs.org/parents/childdevelopment](http://www.pbs.org/parents/childdevelopment)
- [www.cdc.gov/parents](http://www.cdc.gov/parents)



## Information & Resources

- ACE Study findings and information
  - [www.acestudy.org](http://www.acestudy.org) or [www.cdc.gov](http://www.cdc.gov)
- National Scientific Council on the Developing Child at Harvard University
  - [www.developingchild.net](http://www.developingchild.net)
- Academy of Pediatrics
  - [www.brightfutures.aap.org](http://www.brightfutures.aap.org)



## More Information & Resources

- National Center for Trauma-Informed Care –  
[www.mentalhealth.samhsa.gov/nctic](http://www.mentalhealth.samhsa.gov/nctic)
- National Child Traumatic Stress Network –  
[www.nctsnet.org](http://www.nctsnet.org)
- Center for the Study of Social Policy -Information on Strengthening Families and Protective Factors – [www.cssp.org](http://www.cssp.org)
- Center for Injury Prevention and Control –  
[www.cdc.gov/violenceprevention](http://www.cdc.gov/violenceprevention)

